24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Kansas Ag Communities Coalition	C C00569582
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee Date of	Public Distribution/Dissemination
Kansas Press Association	0 27 2014
Mailing Address 5423 SW 7th Street Amount	
City State Zip Code	16456.81
Date of	ction ID : SE.4139 Disbursement or Obligation
Purpose of Expenditure Account Payable - Newspaper advertisement Category/ Type 004	M / D D / Y T Y T Y
Name of Federal Candidate Support Office Sought:	House District:
PAT ROBERTS Oppose Presiden	
Calendar Year-To-Date Per Election for Office Sought Disbursement 2014 Oth	For: Primary X General oner (specify) ►
	f Public Distribution/Dissemination
Mailing Address Amount	t
City State Zip Code	
	Disbursement or Obligation
Purpose of Expenditure Category/ Type	M / D D / Y Y Y Y Y
Name of Federal Candidate Support Office Sought:	House District:
Oppose Presider	
Calendar Year-To-Date Per Election for Office Sought Oth	For: Primary General ner (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	16456.81
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7
(c) TOTAL Independent Expenditures	16456.81
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Mr. Dee Likes [Electronically Filed] Date 10	27 2014
Signature	